Fertilizer Registration Application linois Department of Agriculture ureau of Agricultural Products Inspection tate Fairgrounds O. Box 19281  For License Year:									e Year:	Check#:	RC 105	Amount\$:	R	C 106		Office Use
Pringfield, IL. 62794-9281 (217) 782-3817 TTY: (866) 287-2999  Registration Fees  1. \$20.00- Each fertilizer listed on the form. 2. \$50.00- An additional inspection fee for each dry fertilizer in containers marked 5 lbs or less 3. \$50.00- An additional inspection fee for each liquid fertilizer in containers marked 1 gallon or less. 4. A fertilizer distributed in containers marked both dry 5 lbs or less and liquid 1 gallon or less requires only one (1) additional inspection fee of \$50.00. 5. Fertilizers in containers greater than 5 lbs or 1 gallon or bulk fertilizers (dry and/or liquid) are also subject to a tonnage inspection fee of 25 cents/ton paid at the time of the semi-annual tonnage report.  A label for containers or if bulk, a delivery statement or invoice representing the fertilizer must be submitted for each fertilizer listed on application.  TOTAL NUMBER OF PRODUCTS:  Make check payable to the Illinois Department of Agriculture										Amount\$:  Registration No:  Business Name:  Contact Person:  Address:  City:  Telephone #:		State:_			zip code:	
Office Use	DRY 5 lbs Over 5 Dulk			LIQUID  1 gallon   Over 1   Dulk				SE Non-	NOTE: "Farm" includes specialty farm crops. "Non-Farm" are specialty		-	awn, garden, trees		•		
Jo	or less	lbs	Bulk	or less	gallon	Bulk	Farm	Farm	BRAND a	and GRADE (N-P-K)			i.e. Ca, Mg, S, Fe,			
This s	tate agenc	y is reques	ting disclos	sure of inforn	nation that is	necessary	to accon	nplish the	use the soil amendment applicat statutory purpose as outlined under IL406-0039	ion available at www.agri.s er Illinois Revised Statutes, C	tate.il.us, "forr hapter 56 1/2, I	ms", under the E Paragraphs 55-1	Bureau of Agricultu through 55-21. Fail	ural Products Ture to provide	s Inspection. e this information :	shall prevent this

(Signature of authorized representative)

(Date)

(Print or type name of authorized representative)